

part changes the point of view entirely. While he states, with commendable modesty, that he has done only some preliminary work on the subject, the clinical results which he produces are a remarkable improvement over those of ether anæsthesia. His work has created the most widespread interest, and surgeons and anæsthetists everywhere are eagerly awaiting the production on the market of an anæsthetic agent such as he recommends.

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A VOLUMINOUS report was presented to Parliament on July 17th by the Special Committee on Returned Soldiers. It contained the following recommendations concerning the care and treatment of returned soldiers:

That both Federal and Provincial authorities take up without delay effective measures to prevent the spread of tuberculosis.

That those soldiers who are hopelessly insane should be cared for at the expense of the Federal Government in provincial institutions under the same conditions as fellow-citizens similarly afflicted;

That returned soldiers who are suffering from venereal diseases should be quarantined at the port of arrival in Canada until cured;

That orthopædic institutions be provided at centres throughout Canada in addition to the one located in Toronto;

That sufficient number of returned men be induced to learn and follow the occupation of manufacturers of artificial limbs and that their services be utilized to supply limbs to soldiers free of cost and renewals and repairs at the cost of the State during the life-time of the soldiers;

That returned men who have been undergoing convalescent treatment and have partially completed courses of vocational training be allowed to continue such courses for a period of two months after their discharge as medically fit if, in the opinion of the vocational training officer of the

district, it is in the interest of the State and of themselves that they should do so.

The majority of the committee, including the chairman, Sir Herbert Ames, were of opinion that a special department of the government should be created to direct matters connected with returned members of the Expeditionary Force; other members, however, thought that such questions should be under the control of the Militia Department.

It is suggested in the report that the Dominion and Provincial authorities should coöperate to secure employment for returned soldiers, and that time spent on active service in the case of a civil servant should be accounted absence with leave, his grade and standing in the public service to be determined accordingly.

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A CONFERENCE of medical officers in charge of sanatoria in which returned soldiers are undergoing treatment took place at Ottawa in June. The meeting was presided over by Dr. F. J. Shepherd, of Montreal, and among those present were Sir James Loughheed, president of the Military Hospitals Commission, and Lieutenant-Colonel Thompson, M.P., chief medical officer of the Commission.

The conference was of particular interest in that a number of points came up for consideration concerning the methods of administration and treatment in vogue in the different institutions. A series of questions upon these subjects had previously been submitted to the officers in charge of the various sanatoria by Lieutenant-Colonel Thompson and these, with the replies, formed the basis of discussion. It was adopted some time ago as the policy of the Hospitals Commission that treatment should be given in the sanatoria under its direction to all tuberculous soldiers, whether they had been overseas or not and a large percentage of the cases treated have not been across the water. It was stated that about 1,200 patients had already passed through the

institutions and that about 800 were at the time undergoing treatment.

An advisory committee was appointed to assist the Military Hospitals Commission in its work in connexion with tuberculous soldiers. The members of this committee are Captain J. D. Byers, of Ste. Agathe, Dr. C. D. Parfitt, of Calydon Sanitarium, Gravenhurst, and Dr. J. H. Elliott, of Toronto.

A good deal of attention was given to a discussion of some of the difficulties encountered in enforcing discipline. It was decided that in cases where a soldier had refused treatment and had signed a form releasing the Government of responsibility towards him but later had returned and requested treatment, he should be allowed to reattest and should receive the usual pay and allowances. It was considered inadvisable to send men who had refused treatment and been granted total disability pensions to civilian sanatoria at the expense of the Commission—a practise that had been followed in one or two cases—since the total disability pension amounted to more than the pay, and were this known to the men many of them would probably take advantage of it. It has been found that, as a rule, difficulties arise when officers and men are treated together and it was recommended, therefore, that a special sanitarium for officers should be provided. It was also recommended that a central institution should be established for chronic cases of tuberculosis, as they filled up the sanatoria and occupied space that should be available for curable patients. In the case of incorrigibles, it was thought that the best way to deal with them was to send them to a detention sanitarium where discipline could be enforced more strictly.

Some discussion arose as to the number of patients that could be treated by one medical officer. It was agreed that no doctor should be expected to attend to more than fifty patients, and that every additional forty patients, or less, necessitated the services of another medical officer.

This suggestion was made, however, on the assumption that the physician would be responsible for the medical treatment only and that efficient persons would be appointed to look after other departments.

It has been customary for the medical boards at Quebec to recommend tuberculous soldiers for six months' sanitarium treatment. This has led the men to expect to be cured at the end of the time stated and in many cases it has been difficult to control them and to make them understand that they are not sufficiently cured to return to their homes. It would be better, therefore, if no definite time were mentioned. Another point which led to discussion was whether or not a tuberculous soldier should be permitted to go home for a short furlough before entering a sanitarium. The general opinion was that he should be allowed to visit his people as, in the majority of cases, treatment had already been given in England and the disease was probably quiescent and the danger of spreading infection not great. Moreover, if the permission was not given, the man became restive and discontented and would probably refuse to go to the sanitarium at all. As to the question of holiday leave, it was deemed advisable to grant leave, but not at festive seasons. At such times the patients were tempted to eat and drink too much, and at one institution where leave had been granted at Christmas time every one of the patients suffered a relapse. If the reasons for not granting leave at holiday time were carefully explained to the men, Captain Byers thought there would be no difficulty. Last year he allowed his patients to go home between December 5th and 20th instead of at Christmas. A resolution was moved by Captain Byers and adopted unanimously by the conference that it be made a penal offence for any one to supply a tuberculous soldier with intoxicating drink.

The value of occupation was emphasized particularly. Captain Byers said that since vocational training had been instituted at Ste. Agathe, the men had been happier and more

amenable to discipline and had made more rapid improvement. They ceased to brood over their troubles when they had something to do, and even those who could not sit up were able to do fancy work. They got up little exhibitions of their work when friends came to see them and became so interested that they forgot everything else.

Other recommendations made at the Conference were, that *x*-ray equipment be installed in sanatoria whenever possible, that the number of beds in one institution be limited to 150 or 200, and that a specialist in diseases of the lungs be appointed to all medical boards.

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IN an address at the annual convention of Superintendents of the Poor of the State of New York, Mr. George A. Hastings, the executive secretary of the Committee on Mental Hygiene of the State Charities Aid Association, referred to the importance of providing in every community suitable accommodation for the care of the insane while under observation and until they can be taken to hospital. On more than one occasion attention has been called in this Journal to the need for such accommodation in the cities of Canada, but such cases are still sent to the jails because, with one or two exceptions, there is nowhere else to send them. The subject was discussed at the annual meeting of the Saskatchewan Medical Association in July, when a sub-committee was appointed to take up the matter with the Attorney General and to ascertain whether steps could not be taken to provide proper accommodation for the insane for a few days before they were sent to an asylum.

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A CONFERENCE of representatives of a number of provincial organizations was called at Toronto on August 7th, for the purpose of discussing means of checking the spread of venereal disease and a committee was appointed to consider the problem. Among the organizations represented were

the National Council of the Young Men's Christian Association, the National Council of Women, the Local Council of Women, the Women's Liberal and Conservative Associations, the Daughters of the Empire, and the Toronto Board of Trade. It was stated by Captain Gordon Bates, C.A.M.C., of the Base Hospital, that approximately 1,500 patients suffering from venereal disease were admitted to that hospital every year, and that during the first three months of 1917 12 per cent. of all the patients in the public wards of the Toronto General Hospital, upon examination, gave a positive Wassermann reaction. Moreover, 25 per cent. of the male admissions to the Toronto Hospital for the Insane were cases of general paresis. It was agreed that the time had come when steps should be taken to inform the public of the danger of infection, and as a restrictive measure it was suggested that women patrols should be formed. It was announced at the meeting that the services of lecturers upon matters connected with the subject under discussion would be available upon demand by any organization that wished to take part in the campaign of education.

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ADDRESSING a number of physicians at Hamilton, on July 27th last, Colonel Ryerson, A.D.M.S., Toronto, explained that, under the selective draft scheme, doctors of military age would be divided into three classes according to their physical fitness—Class A, who would go overseas; Class B, who would be posted for duty probably in England or at one of the Canadian camps; and Class C, who would serve on the staffs of hospitals in this country. Forty-eight years was the extreme age limit for home service, and forty-five years for service overseas. Physicians over age might be attached to Canadian military hospitals as consultants. Dr. Wickens, a member of the Ontario College of Physicians and Surgeons, said that the committee appointed to make a census of the medical men in the province, required the names of all medical men whether of military age or not.

It is the intention to establish at Halifax an institution for the education and training of blind soldiers. The work will be organized, on the lines of that done at the St. Dunstan's Home in London, by Sir Frederick Fraser who has been so successful in building up the Halifax School for the Blind.

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THE summer hotel at Qualicum, the popular resort on Vancouver Island, has been converted into a convalescent home for returned soldiers. The patients—over a hundred in number—are encouraged to go in for all kinds of sport, including boating, tennis, cricket, bowling, and golf, and are given vocational training of every description. A machine shop, garage, and carpenter's shop have been supplied for the training of those who wish to go in for industrial work, and a recreation building is to be established where a motion picture machine will be installed.

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As a means of preventing the spread of tuberculosis in cattle, and its consequent distribution through the milk supply, an order-in-council has been passed by the Government, which requires that all dairies in which milk or cream are produced for sale shall be licensed and that no license shall be issued unless the dairy conform to a required standard; that is, unless the stable shall have an ample amount of air space, and at least two square feet of glass for each cow, and shall be well ventilated, drained, and kept clean and sanitary. Two years from the date of the first test of the cattle of a dairy, the sale within the city or town of unpasteurized milk or cream from that dairy shall be prohibited, unless the veterinary inspector can certify that the herd contains no reactor, and in his opinion is free of tuberculosis. The inspectors are to use the tuberculin test and examine the cows.

Compensation will be made to owners of cows slaughtered, at the rate of one-half of the appraised value of those destroyed

for open tuberculosis, and two-thirds if destroyed as a reactor at the request of the owner, and valuation is to be made by the veterinary inspector. Milk or cream from a herd containing reactors shall not be sold unless it has been pasteurized.

Whenever in the opinion of the veterinary director-general the work of eliminating tuberculosis from the herd supplying a municipality has reached a satisfactory point, the municipality will be expected to maintain the standard reached.

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AN interesting account of the evolution of the municipal hospital in the province of Saskatchewan is published on another page of this issue. The writer, Mr. D. G. Tuckwell, has contributed largely to the success of the movement by his own unfailing interest and his efforts to arouse public enthusiasm in a matter which is of the greatest importance to the public generally. A few months ago a Municipal Hospital Act was also passed in the province of Alberta. It provides that the province shall be divided into hospital districts and that hospital boards shall be appointed which, under the direction of the Minister of Municipalities, shall provide for the location and purchase of a suitable hospital site; the purchase, acquisition, or erection of buildings, furnishings and equipment; and the engagement of duly qualified medical practitioners and registered nurses. It is the duty of these boards also to arrange a schedule of fees proposed to be charged and to decide upon the method of their collection. The Act does not compel a municipality to provide free hospital accommodation but every facility and inducement is offered for the establishment of such hospitals and at the same time the responsibility is placed upon the provincial government of seeing that money collected for this purpose is expended to the best advantage. The taxation is not to exceed two mills in the dollar or two cents an acre, but no tax is to be less than ten cents.